

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	1-31-01
FORMALITY REVIEW	MB	954	2/15/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	10	✓
2	✓	11	✓
3	✓	12	✓
4	✓	13	✓
5	✓	14	✓
6	✓	15	✓
7	✓	16	✓
8	✓	17	✓
9	✓	18	✓
10	✓	19	✓
11	✓	20	✓
12	✓	21	✓
13	✓	22	✓
14	✓	23	✓
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18	✓	27	✓
19	✓	28	✓
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32	✓	41	✓
33	✓	42	✓
34	✓	43	✓
35	✓	44	✓
36	✓	45	✓
37	✓	46	✓
38	✓	47	✓
39	✓	48	✓
40	✓	49	✓
41	✓	50	✓

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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